Docket No.

5244-0125-2

IN THE UNITED STATES PATENT AND TRA

Tetsuro MOTOYAMA et al. IN RE APPLICATION OF:

SERIAL NO: 09/453,936

GAU:

2153

FILED:

May 17, 2000

EXAMINER: EDELMAN, BRADLEY E.

FOR:

METHOD AND SYSTEM OF REMOTE DIAGNOSTIC, CONTROL AND INFORMATION COLLECTION USING A DYNAMIC LINKED LIBRARY OF MULTIPLE FORMATS AND MULTIPLE PROTOCOLS WITH

RESTRICTION ON PROTOCOL

INFORMATION DISCLOSURE STATEMENT UNDER 37 CFR 1.97

COMMISSIONER FOR PATENTS ALEXANDRIA, VIRGINIA 22313

FEB 1 0 2004

SIR:

Applicant(s) wish to disclose the following information.

Technology Center 2100

REFERENCES

The applicant(s) wish to make of record the references listed on the attached form PTO-1449. Copies of the listed
references are attached, where required, as are either statements of relevancy or any readily available English
translations of pertinent portions of any non-English language references.

☐ A check or credit card payment form is attached in the amount required under 37 CFR §1.17(p).

RELATED CASES

Attached is a list of applicant's pending application(s) or issued patent(s) which may be related to the present application. A copy of the specification(s) of the pending application(s) is attached.

☐ A check or credit card payment form is attached in the amount required under 37 CFR §1.17(p).

CERTIFICATION

- Each item of information contained in this information disclosure statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this statement.
- No item of information contained in this information disclosure statement was cited in a communication from a foreign patent office in a counterpart foreign application or, to the knowledge of the undersigned, having made reasonable inquiry, was known to any individual designated in 37 CFR §1.56(c) more than three months prior to the filing of this statement.

DEPOSIT ACCOUNT

Please charge any additional fees for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to deposit account number 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

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